

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

2001US405  
10/002,710

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

|   |                 |              |
|---|-----------------|--------------|
| TOTAL CLAIMS  | 17              |              |
| FOR   | NUMBER FILED    | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 17 minus 20 = * |              |
| INDEPENDENT CLAIMS  | 4 minus 3 = *   | 1            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |                 |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

|             |   |      |                                    |               |
|-------------|---|------|------------------------------------|---------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT  |      | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | * 18 | Minus ** 20                        | = -           |
|             | Independent   | * 4  | Minus *** 4                        | = -           |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |      |                                    |               |

(Column 1)

(Column 2)

(Column 3)

|             |   |   |                                    |               |
|-------------|---|---|------------------------------------|---------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT  |   | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | * | Minus **                           | =             |
|             | Independent   | * | Minus ***                          | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |                                    |               |

(Column 1)

(Column 2)

(Column 3)

|             |   |   |                                    |               |
|-------------|---|---|------------------------------------|---------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT  |   | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | * | Minus **                           | =             |
|             | Independent   | * | Minus ***                          | =             |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |                                    |               |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

Th "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

|           |        |    |           |        |
|-----------|--------|----|-----------|--------|
| RATE      | FEE    |    | RATE      | FEE    |
| BASIC FEE | 370.00 | OR | BASIC FEE | 740.00 |
| X\$ 9=    |        | OR | X\$18=    |        |
| X42=      |        | OR | X84=      | 84     |
| +140=     |        | OR | +280=     |        |
| TOTAL     |        | OR | TOTAL     | 824    |

SMALL ENTITY

OR

OTHER THAN SMALL ENTITY

|                  |                |    |                  |                |
|------------------|----------------|----|------------------|----------------|
| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
| X\$ 9=           |                | OR | X\$18=           |                |
| X42=             |                | OR | X84=             |                |
| +140=            |                | OR | +280=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

|                  |                |    |                  |                |
|------------------|----------------|----|------------------|----------------|
| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
| X\$ 9=           |                | OR | X\$18=           |                |
| X42=             |                | OR | X84=             |                |
| +140=            |                | OR | +280=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

|                  |                |    |                  |                |
|------------------|----------------|----|------------------|----------------|
| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
| X\$ 9=           |                | OR | X\$18=           |                |
| X42=             |                | OR | X84=             |                |
| +140=            |                | OR | +280=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

AUG 20 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: LeGrow et al.

Docket: 2001US405

Serial No.: 10/002,710

Group Art Unit: 1615

Filed: October 24, 2001

Examiner: Fubara, B.

For: Leave-On Compositions for Personal Care

OFFICIAL


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Mail Stop: Amendment  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Pursuant to 37 CFR 1.136(a) Applicants hereby request a one-month extension of time for responding to the Official Action dated April 20, 2004. The Commissioner is authorized to charge the fee of \$110.00 or whatever fee may be required for such an extension to Account No. 03-2060 for which purpose a duplicate copy of this sheet is attached. If any additional fees are due in connection with this application, the Commissioner is authorized to charge the fee to deposit account 03-2060.

Respectfully submitted,

  
Anthony A. Bisulca  
Attorney for Applicant  
Registration No. 40,913

(CUSTOMER NUMBER 25,255)

Clariant Corporation  
Industrial Property Department  
4000 Monroe Road  
Charlotte, NC 28205  
Phone 704 331-7151  
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CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8a) and 1.10

I hereby certify that this correspondence is, on the date shown below, is being transmitted by facsimile to Centralized Facsimile Number, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, Fax No. 703-872-9306 (2 pages)

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Date: August 20, 2004